

14/60 Riggs/Wilcoxon House.
19-86



Historic Preservation Commission

100 Maryland Avenue, Rockville, Maryland 20850

279-1327

14/60

APPLICATION FOR HISTORIC AREA WORK PERMIT

TAX ACCOUNT # _____

NAME OF PROPERTY OWNER JEFF L. MUSKIN TELEPHONE NO. (301) 977-7094
(Contract/Purchaser) (Include Area Code)

ADDRESS Gathersburg, md STATE _____ ZIP _____

CONTRACTOR _____ TELEPHONE NO. _____

PLANS PREPARED BY _____ CONTRACTOR REGISTRATION NUMBER _____
NA TELEPHONE NO. _____
REGISTRATION NUMBER _____

LOCATION OF BUILDING/PREMISE

House Number 8820 Street Huntmaster Road

Town/City Gathersburg, md Election District _____

Nearest Cross Street Bank Rd.

Lot _____ Block T Subdivision Goshen Estates

Liber _____ Folio _____ Parcel _____

1A. TYPE OF PERMIT ACTION: (circle one)

Construct Extend/Add Alter/Renovate Repair Circle One: A/C Slab Room Addition
Wreck/Raze Move Revocable Revision Fence/Wall (complete Section 4) Other Temporary R.O.W.

1B. CONSTRUCTION COSTS ESTIMATE \$ 15,000

1C. IF THIS IS A REVISION OF A PREVIOUSLY APPROVED ACTIVE PERMIT SEE PERMIT # _____

1D. INDICATE NAME OF ELECTRIC UTILITY COMPANY _____

1E. IS THIS PROPERTY A HISTORICAL SITE? YES

PART TWO: COMPLETE FOR NEW CONSTRUCTION AND EXTEND/ADDITIONS

2A. TYPE OF SEWAGE DISPOSAL
01 () WSSC 02 () Septic
03 () Other _____

2B. TYPE OF WATER SUPPLY
01 () WSSC 02 () Well
03 () Other _____

PART THREE: COMPLETE ONLY FOR FENCE/RETAINING WALL

4A. HEIGHT _____ feet _____ inches

4B. Indicate whether the fence or retaining wall is to be constructed on one of the following locations:
1. On party line/Property line _____
2. Entirely on land of owner _____
3. On public right of way/easement _____ (Revocable Letter Required).

I hereby certify that I have the authority to make the foregoing application, that the application is correct, and that the construction will comply with plans approved by all agencies listed and I hereby acknowledge and accept this to be a condition for the issuance of this permit.

Signature of owner or authorized agent (agent must have signature notarized on back) _____ Date 17 NOV 86

APPROVED _____ For Chairperson, Historic Preservation Commission
DISAPPROVED _____ Signature _____ Date _____

APPLICATION/PERMIT NO: 19186 FILING FEE: \$ _____
DATE FILED: _____ PERMIT FEE: \$ _____
DATE ISSUED: _____ BALANCE \$ _____
OWNERSHIP CODE: _____ RECEIPT NO: _____ FEE WAIVED: _____

SEE REVERSE SIDE FOR INSTRUCTIONS

THE FOLLOWING ITEM MUST BE COMPLETED AND THE REQUIRED DOCUMENTS MUST ACCOMPANY THIS APPLICATION FOR HISTORIC PRESERVATION

DESCRIPTION OF PROPOSED WORK: (including composition, color and texture of materials to be used)

APPL. ① Install ~~temporary~~ BARN ON EXISTING BARN FOUNDATION - AERON DESTROYED OLD

APPL. BARN - 50' x 43'

② SCREEN VIEW OF ABOVE BARN WITH 20' PINE OR SPRUCE TREES

③ Replace windows and install missing DOORS ON CINDERBLOCK "DAIRY" BLDG.

④ Stucco DAIRY - PAINT TIN ROOF - MAKE ALL NECESSARY REPAIRS TO BLDG.

(If more space is needed, attach additional sheets on plain or lined paper to this application)

ATTACH TO THIS APPLICATION (2) COPIES OF: SUCH SITE PLANS (lot dimensions, building location with dimensions, drives, walks, fences, patios, etc. proposed or existing) and/or ARCHITECTURAL DRAWINGS (floor plans, elevations, etc.), PHOTOGRAPHS OF THE AREA AFFECTED, as are necessary to fully describe the proposed work.

MAIL OR DELIVER THE APPLICATION AND ALL REQUIRED DOCUMENTS TO THE: HISTORIC PRESERVATION COMMISSION 100 MARYLAND AVENUE ROCKVILLE, MARYLAND 20850

MR. JAMES EARL...
100 MARYLAND AVENUE
ROCKVILLE, MARYLAND 20850

APPL. 100

RECEIVED...
HISTORIC PRESERVATION COMMISSION

APPL. 100